PATENT APPLICATION RECORD

Effective December 8, 2004

Application or Docket Number

10/533844

| | | CLAIMS A | AS FILED - | PART I | | | SMALL ENT | TITY | | OTHER | THAN |
|---|--|---|--|--------------------------------|--|-------------------------------|---------------------|------------------------|------------------|---------------------|------------------------|
| | | | (Colum | ın 1) | (| Column 2) | TYPE | | OR | SMALL | |
| U.S | . NATIONAL S | STAGE FEES | | | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL ENT. = \$ 150 | | LARG | SE ENT. = \$ 300 | BASIC FEE | 150 | OR | BASIC FEE | |
| EXAMINATION FEE | | | Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100 | | | her situations = 100 / \$ 200 | EXAM. FEE | 100 | | EXAM. FEE | |
| SEARCH FEE | | | U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400 | | All other situations = \$ 250 / \$ 500 | | SEARCH FEE | 50 | | SEARCH FEE | |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | X \$ 125 = | | | X \$ 250 = | |
| тот | AL CHARGEAE | BLE CLAIMS | 63 mi | nus 20 = | , | 43 | X \$ 25 = | 1075 | OR | X \$ 50 = | |
| INDI | EPENDENT CL | AIMS | 5 " | ninus 3 = | * | .2 | X \$ 100 = | 200 | OR | X \$ 200 = | |
| MUL | TIPLE DEPENI | DENT CLAIM PR | ESENT | • | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOTAL | 1575 | OR | TOTAL | | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST | | | | | | SMALL E | NTITY ADDI- | OR | OTHER SMALL E | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | PREVIO PAID | USLY | PRESENT EXTRA | RATE | TIONAL | | RATE | TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | • | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| ` | | | - | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colun | nn 2) | (Column 3) | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUME PREVIO PAID | BER OUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | | | | | | |

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.